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Fax Cover Sheet

Date: 8/31/01	
To: Sivik	From: Examiner DeWitty
Application/Control Number: 09/599,624	Art Unit: 1616
Fax No.: 513-626-1355	Phone No.: 703-308-2411
Voice No.:	Return Fax No.:
Re: Proposed Restriction & Election	CC:
<input type="checkbox"/> Urgent <input checked="" type="checkbox"/> For Review <input type="checkbox"/> For Comment <input type="checkbox"/> For Reply <input type="checkbox"/> Per Your Request	

Comments:

Please find attached the Restricted Groupings and Election of species. If you have any questions, do not hesitate to contact me.

Sincerely,

Number of pages 3 including this page

STATEMENT OF CONFIDENTIALITY

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Assistant Commissioner for Patents
Washington, DC 20231

Restriction should be made to one of the following independent inventions:

~~1.~~

- Claims 1-25, 29-30, 36-38, and 42-46, drawn to a topical composition, classified in class 424, subclass 435.
2. Claims 26-27, drawn to an anti-dandruff composition, classified in class 514, subclass 852.
3. Claim 31, drawn to a method of treating athlete's foot, classified in class 514, subclass 858.
4. Claim 32, drawn to a method of treating microbial infections, classified in class 514, subclass 858.
5. Claim 34, drawn to a method of treating fungal infections, classified in class 424, subclass 404.
6. Claim 35, drawn to a method of treating dandruff, classified in class 514, subclass 852.
7. Claim 33, drawn to a method of improving appearance, classified in class 424, subclass 132.
8. Claim 39, drawn to a method of regulating hair growth, classified in class 514, subclass 852.
9. Claim 40, drawn to a method of stimulating hair growth, classified in class 514, subclass 852.
10. Claim 41, drawn to a method of inhibiting or reducing hair loss, classified in class 514, subclass 852.

Depending on the invention elected, please elect a species for each of the following:

1. elect a metal ion source for claims 1, 6, 7, 8, 9, 27, 28, and 36 (if applicable)
2. elect a pyrithione for claims 2 and 3 (if applicable)
3. elect a surfactant for claim 17 (if applicable)
4. elect an anti-microbial active agent for claim 23 (if applicable)
5. elect a conditioning agent for claim 25 (if applicable)

